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FORM D

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



SEC U	SE ONLY
Prefix	Serial
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DATE F	RECEIVED

Name of Offering ([] chec Sandler Associates II, L.P. (The "Issu	k if this is an amendment and name has chaer")	inged, and indicate change.)
Filing Under (Check box(es) that apply)	: [] Rule 504 [] Rule 505	[X] Rule 506 [] Section 4(6) [] ULOE
Type of Filing: [] New F	Filing [X] Amendment	
	A. BASIC IDENTIFICATION	DATA
Enter the information requested about t	he issuer	
Name of Issuer [] check Sandler Associates II, L.P.	if this is an amendment and name has char	ged, and indicate change.)
Address of Executive Offices (711 Fifth Avenue, 15th Floor, New Yo	Number and Street, City, State, Zip Code) ork, New York 10022 USA	Telephone Number (Including Area Code) (212) 754-8100
Address of Principal Business Operatio (if different from Executive Offices) San	ns (Number and Street, City, State, Zip Codne As Above	Telephone Number (Including Area Code) Same As Above
Brief Description of Business The Issuer's objective is to invest preservices, and technology industries.		edia, entertainment, telecommunications, information
Type of Business Organization	[V 1 limited partnership already f	ormed [] other (please specify): PROCESSE
[] corporation	[X] limited partnership, already f	
[] business trust	[] limited partnership, to be form	ed <u>APR 2 6 200</u> 5
Actual or Estimated Date of Incorporation	on or Organization: Month/Year 11/2000	[X] Actual [] Estimated 2 THOWSON
Jurisdiction of Incorporation or Organiza		e abbreviation for State:

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, it received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: [X] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) SAM SA LLC (the "General Partner")				
Business or Residence Address (Numb 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) DRP SA LLC (the "General Partner")				. "
Business or Residence Address (Numb 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Harvey Sandler Revocable Trust (the "Ger	neral Partner")			
Business or Residence Address (Numb 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Zi	p Code)		÷
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Marocco, Michael				elinopylana,
Business or Residence Address (Numb 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Zi	p Code)		
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Craven, Hannah				
Business or Residence Address (Numb 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Zi	p Code)	·	
Check Box(es) that Apply: [] Promoter	[] Beneficial Owner	[] Executive Officer	[] Director	[X] General and/or Managing Partner
Full Name (Last name first, if individual) Sandler, Andrew				
Business or Residence Address 711 Fifth Avenue, 15th Floor New York, New York 10022 USA	er and Street, City, State, Z	p Code)		Survey Constants

Check Box(es) that Apply: [] Promoter	[] Beneficial Owner [] Executive Officer [] Der and Street, City, State, Zip Code)	[] Director	[X] General and/or Managing Partner	or .	
Full Name (Last name first, if individual) Schimmel, Douglas E.					
Business or Residence Address (Num 711 Fifth Avenue, 15th Floor	ber and Street, City, State, Zi	p Code)			

New York, New York 10022 USA

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 	B. INFORMATION ABOUT OFFERING		
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.	Yes [] \$* 1,000	No [X] ,000
3.	Does the offering permit joint ownership of a single unit?	Yes	No []
4.	or <u>and the state of the control of </u>	. ^]	. 1
	ull Name (Last name first, if individual) ot applicable.		
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)		
Na	ame of Associated Broker or Dealer		
	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	l State	,
]	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] H IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] M MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] ND [] OH [] OK [] C	HI [] MS [] DR [] WY []	ID [] MO [] PA [] PR []
Fu	ull Name (Last name first, if individual)	,	
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)		And Section 1
Na	ame of Associated Broker or Dealer		
	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	l State	28
1	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] H IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] M MT [] NE [] NV [] NH [] NJ [] NY [] NC [] ND [] OH [] OK [] C	HI [] MS [] OR [] MY []	ID [] MO [] PA [] PR []
Fu	ull Name (Last name first, if individual)		
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)		· .
Na	ame of Associated Broker or Dealer	W	
	tates in Which Person Listed Has Solicited or Intends to Solicit Purchasers Check "All States" or check individual States)	1 6+	0.5
]	AL [] AK [] AZ [] AR [] CA [] CO [] CT [] DE [] DC [] FL [] GA [] H IL [] IN [] IA [] KS [] KY [] LA [] ME [] MD [] MA [] MI [] MN [] M MT [] NE [] NV [] NH [] NJ [] NM [] NY [] NC [] OH [] OK [] C	l State HI [] MS [] DR [] WY []	ID [] MO [] PA [] PR []

C. OFFERING PRICE, NUMBER OF INVESTORS; EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security

Type of Security	,			Aggregate Offering Price	Amount Already Sold
Debt			 \$	<u>0</u>	\$ <u>0</u>
Equity:			 \$	<u>0</u>	\$ <u>0</u>
	□ Common	□ Preferred		_	_
Convertible Sec	urities (including warrants	·):	 \$	<u>0</u>	\$ <u>0</u>
Partnership Inter	rests		 \$	1,000,000,000(a)	\$ 48,623,808
Other (Specify:))		 \$	0	\$ 0
Total			 \$	1,000,000,000(a)	\$ 48,623,808
Ans	swer also in Appendix, Co	olumn 4, if filing under ULOE.			

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under

Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	<u>80</u>	\$ 48,623,808
Non-accredited Investors	<u>o</u>	\$ <u>o</u>
Total (for filings under Rule 504 only)	<u>N/A</u>	\$ N/A

Type of

Answer also in Appendix, Column 3, if filing under ULOE.

 If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.
 Type of offering

	Security	
Rule 505	N/A	\$
Regulation A	N/A	\$
Rule 504	N/A	\$
Total	N/A_	\$
a. Furnish a statement of all expenses in connection with the issuance and distribution of the		
securities in this offering. Exclude amounts relating solely to organization expenses of the		
ssuer. The information may be given as subject to future continuencies. If the amount of an		

Transfer Agent's Fees	لظا	\$ U
Printing and Engraving Costs	X	\$ <u>2,500</u>
Legal Fees	X	\$ 35,000
Accounting Fees	图	\$ <u>7,500</u>
Engineering Fees	X	\$ 0
Sales Commissions (specify finders' fees separately)	X	\$ <u> </u>
Other Expenses (identify filing fees)	X	\$ 5,000
Total	X	\$ 50,000

⁽a) Open-ended fund; estimated maximum aggregate offering amount.

Dollar Amount Sold

1.	b. Enter the difference between the aggregate offering price given in response to						
	1 and total expenses furnished in response to Part C - Question 4.a. This difference gross proceeds to the issuer."	e is the "a	djusted			\$	999,950,000
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or profor each of the purposes below. If the amount for any purpose is not known, furnish check the box to the left of the estimate. The total of the payments listed must equipose proceeds to the issuer set forth in response to Part C - Question 4.b above.	n an estim	ate and				
			Paymer Office Director Affiliat	rs, rs, &			Payments to Others
	Salaries and fees	X	\$	<u>0</u>	X	\$	<u>0</u>
	Purchase of real estate	X	\$	<u>o</u>	X	\$	<u>0</u>
	Purchase, rental or leasing and installation of machinery and equipment	図	\$	<u>0</u>	X	\$	<u>0</u>
	Construction or leasing of plant buildings and facilities	X	\$	<u>o</u>	X	\$	<u>0</u>
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	図	\$	<u>o</u> .	X	\$	<u>0</u>
	Repayment of indebtedness	X	\$	<u>o</u>	X	\$	<u>0</u>
	Working capital	X	\$	<u>o</u>	X	\$	<u>0</u>
	Other (specify): Portfolio Investments	X	\$	<u>o</u>	X	\$	999,950,000
	Column Totals	X	\$	<u>o</u>	X	\$	999,950,000
	Total Payments Listed (column totals added)	X		\$ <u>9</u> !	99,95	0,0	<u>00</u>
	. The second sec	•					
	D. FEDERAL SIGNATURE			<u></u>			
oll	e issuer has duly caused this notice to be signed by the undersigned duly authorize owing signature constitutes an undertaking by the issuer to furnish to the U.S. Squest of its staff, the information furnished by the issuer to any non-accredited investors.	ecurities a	and Exchar	nge Co	mmis	sior	n, upon written
	uer (Print or Type) Signature		Date				
Sa	ndler Associates II, L.P.			1,0			

Title of Signer (Print or Type)
General Partner

Name (Print or Type)
Andrew Sandler

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)